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| (Requestor's Name) |
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| (City/Clots Tim/Dhana th |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/12

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: Red | d and Blue Ent Incorporated | | |
|-------------------------|---|--|---|
| - | (PROPOSED CORPORA ginal and one (1) copy of the arti | TE NAME - MUST INCL | |
| □ \$70,00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| FROM: J | orden K. Ent | (Printed or typed) | |
| | 4059 Ferrarra St. | Address | |
| | Jacksonville, FL 32217 | State & Zip | |
| | 904-591-0836 | elephone number | |

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

04 APR -8 PM 3:57

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Redd and Blue Ent Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4059 Ferrarra St.

Jacksonville, FL 32217

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provide diversified business services.

ARTICLE IV SHARES

The number of shares of stock is: 100.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Deborah A. Ent, President 4059 Ferrarra St. Jacksonville, FL 32217 Jorden K. Ent, Vice President 4059 Ferrarra St. Jacksonville, FL 32217

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Jorden K. Ent 4059 Ferrarra St Jacksonville, FL 32217

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Deborah A. Ent 4059 Ferrarra St. Jacksonville, FL 32217

| ************ | ************* |
|---|---|
| Having been named as registered agent to accept service of certificate, I am familiar with and accept the appointment a | f process for the above stated corporation at the place designated in thi s registered agent and agree to act in this capacity |
| land Ist | 4/3/04 |
| Signature/Registered Agent | Date |
| Debank a Est | - e/3/04 |
| Signature/Incorporator | Date |